# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2005**
**Secretary of State**

DOCUMENT# P95000015118

**Entity Name:** HIGH CLIFF HOLDINGS, INC.

**Current Principal Place of Business:**

4612 S. OCEAN BLVD.
HIGHLAND BEACH, FL 33487

**New Principal Place of Business:**

**Current Mailing Address:**

4612 S. OCEAN BLVD.
HIGHLAND BEACH, FL 33487

**New Mailing Address:**

**FEI Number: 65-0660190** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MILANI, CAMILLO D
4612 S. OCEAN BLVD.
HIGHLAND BEACH, FL 33487 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPV ( ) Delete
Name: MILANI, LUCIA,
Address: 44 UPLANDS AVE.
City-St-Zip: THORNHILL, ONTARIO CANADA, L3T4A5

Title: ST ( ) Delete
Name: MILANI, LUCIA,
Address: 44 UPLANDS AVE.
City-St-Zip: THORNHILL, ONTARIO CANADA, L3T4A5

Title: D (X) Delete
Name: MILANI, CAMILLO D
Address: 4612 S OCEAN BLVD
City-St-Zip: HIGHLAND BEACH, FL 33487

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPV (X) Change ( ) Addition
Name: MILANI, LUCIA
Address: 4612 S. OCEAN BLVD
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: ST (X) Change ( ) Addition
Name: MILANI, CAMILLO D
Address: 4612 S. OCEAN BLVD.
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAM MILANI ST 04/29/2005

Electronic Signature of Signing Officer or Director — Date